2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003
Secretary of State

DOCUMENT# P94000086460

Entity Name: COMPLIANCE SERVICES, INC.

Current Principal Place of Business:

508 PLANTERS WOOD CT.
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1647
VALRICO, FL 335941647 US

New Mailing Address:

P.O. BOX 1647
VALRICO, FL 335951647 US

FEI Number: 59-3282925 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PHILLIPS, DIANNE M
508 PLANTERS WOOD CT.
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PDC ( ) Delete
Name: PHILLIPS DIANNE, M.
Address: 508 PLANTERS WOOD CT.
City-St-Zip: VALRICO, FL 33594

Title: VTSD ( ) Delete
Name: PHILLIPS, DANNY J
Address: 508 PLANTERS WOOD CT.
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete
Name: PHILLIPS, STEPHEN D
Address: 11414 BUCHANAN LANE
City-St-Zip: SEFFNER, FL 33584

Title: D ( ) Delete
Name: PHILLIPS, GREGORY D
Address: 603 STONE DR.
City-St-Zip: BRANDON, FL 33510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANNY J PHILLIPS VTSD 01/15/2003

Electronic Signature of Signing Officer or Director — Date